


7/10/08 POC
acc table
with addendum
Letter sent
B. Cavanaugh

PRINTED: 06/25/2008
FORM APPROVED

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVN556S	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____		(X3) DATE SURVEY COMPLETED 06/13/2008
NAME OF PROVIDER OR SUPPLIER HEARTHSTONE OF NORTHERN NEVADA			STREET ADDRESS, CITY, STATE, ZIP CODE 1950 BARING BLVD SPARKS, NV 89434		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		(X5) COMPLETE DATE
Z 000	Initial Comments This Statement of Deficiencies was generated as the result of a State licensure survey conducted at your facility from 6/9/08 through 6/13/08. Ten personnel records were reviewed The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws. The following regulatory deficiencies were identified:	Z 000	<div>RECEIVED JUL 08 2008 BUREAU OF LICENSURE AND CERTIFICATION CARSON CITY, NEVADA</div>		7/3/08
Z342	NAC 449.74511 Personnel Records - Licenses, TB, Background 3. A current and accurate personnel record for each employee of the facility must be maintained at the facility. The record must include, without limitation: a) Evidence that the employee has obtained any license, certificate or registration, and possesses the experience and qualifications, required for the position held by the employee; b) Such health records as are required by chapter 441A of NAC which include evidence that the employee has had a skin test for tuberculosis in accordance with NAC 441A.375; and c) Documentation that the facility has not received any information that the employee has been convicted of a crime listed in paragraph (a) of subsection 1 of NRS 449.188. This Regulation is not met as evidenced by:	Z342			

If deficiencies are cited, an approved plan of correction must be returned within 10 days after receipt of this statement of deficiencies.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
	Administrator	7/3/08

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Z342	Continued From page 1 Based on record review and interview, it was determined that the facility failed to obtain tuberculosis testing in accordance with NAC 441A for 1 of 10 employees. (#10) Findings include: Employee #10: The employee was hired on 3/18/08. Review of the record failed to reveal evidence of tuberculosis testing. An interview with the staff development coordinator at approximately 2:00 PM on 6/12/08, confirmed that the facility had no evidence of tuberculosis testing. Severity 2 Scope 1	Z342	SYSTEMS CHANGES: The Staff Development Coordinator has developed a "tickler" system to monitor employee's required TB screens. Results will be recorded on the "Personnel Record Check List." MONITORING: The Staff Development Coordinator will report their findings to the monthly Performance Improvement Committee. Performance improvement plans will be implemented as needed	7/3/08
Z393	Personnel Training in Dementia NAC 449.74522 Employees of facility which provides care to persons with dementia. 1. Except as otherwise provided in subsection 4, each person who is employed by a facility for skilled nursing which provides care to persons with any form of dementia, including, without limitation, dementia caused by Alzheimer's disease, who has direct contact with and provides care to persons with any form of dementia and who is licensed or certified by an occupational licensing board must complete the following number of hours of continuing education specifically related to dementia: (a) In his first year of employment with a facility for skilled nursing, 8 hours which must be completed within the first 30 days after the employee begins employment; and (b) For every year after the first year of employment, 3 hours which must be completed on or before the anniversary date of the first day of employment.	Z393		

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AND CERTIFICATION
CARSON CITY, NEVADA

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**Z 342 PERSONNEL RECORDS-
LICENSES, TB, BACKGROUND**

CORRECTIVE ACTION:

Employee # 10 is no longer an
employee of the facility.

The facility has hired a full-time
Staff Development Coordinator
to ensure training and education for
facility staff follows regulations.

IDENTIFICATION OF OTHERS

All personnel and residents have the
potential to be affected by this practice.

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

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Z393	Personnel Training in Dementia NAC 449.74522 Employees of facility which provides care to persons with dementia. 1. Except as otherwise provided in subsection 4, each person who is employed by a facility for skilled nursing which provides care to persons with any form of dementia, including, without limitation, dementia caused by Alzheimer ' s disease, who has direct contact with and provides care to persons with any form of dementia and who is licensed or certified by an occupational licensing board must complete the following number of hours of continuing education specifically related to dementia: (a) In his first year of employment with a facility for skilled nursing, 8 hours which must be completed within the first 30 days after the employee begins employment; and (b) For every year after the first year of employment, 3 hours which must be completed on or before the anniversary date of the first day of employment.	Z393	MONITORING: The Staff Development Coordinator will report their findings to the monthly Performance Improvement Committee . Performance improvement plans will be implemented as needed	

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Z393	Continued From page 2 2. The hours of continuing education required to be completed pursuant to this section: (a) Must be approved by the occupational licensing board which licensed or certified the person completing the continuing education; and (b) May be used to satisfy any continuing education requirements of an occupational licensing board and do not constitute additional hours or units of required continuing education. 3. Each facility for skilled nursing shall maintain proof of completion of the hours of continuing education required pursuant to this section in the personnel file of each employee of the facility who is required to complete continuing education pursuant to this section. 4. A person employed by a facility for skilled nursing which provides care to persons with any form of dementia, including, without limitation, dementia caused by Alzheimer's disease, is not required to complete the hours of continuing education specifically related to dementia required pursuant to subsection 1 if he has completed that training within the previous 12 months. 5. As used in this section, "continuing education specifically related to dementia" includes, without limitation, instruction regarding: (a) An overview of the disease of dementia, including, without limitation, dementia caused by Alzheimer's disease, which includes instruction on the symptoms, prognosis and treatment of the disease; (b) Communicating with a person with dementia; (c) Providing personal care to a person with dementia; (d) Recreational and social activities for a person with dementia; (e) Aggressive and other difficult behaviors of a person with dementia; and (f) Advising family members of a person with	Z393	Z 393 PERSONNEL TRAINING IN DEMENTIA CORRECTIVE ACTION The facility has hired a full-time Staff Development Coordinator to ensure training and education for facility staff follows regulations. On 6/23/08, the Staff Development Coordinator conducted the mandatory Alzheimer's Training. IDENTIFICATION OF OTHERS: The Staff Development Coordinator will identify employees who need the annual Alzheimer's training (3 hour) through a review of their employee's personnel record. SYSTEMS CHANGES: The Staff Development Coordinator, or their designee, will provide new employees with the required 8 hour Alzheimer's training during their orientation week. The Staff Development Coordinator is now conducting the required Alzheimer's training monthly for employees. MONITORING: The Staff Development Coordinator will report their findings to the monthly Performance Improvement Committee. Performance improvement plans will be implemented as needed.	

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Z393	<p>Continued From page 3</p> <p>dementia concerning interaction with the person with dementia.</p> <p>This Regulation is not met as evidenced by: Based on record review and interview, it was determined that the facility failed to provide dementia training in accordance with NAC 449.74522 for 3 of 10 employees. (#2, #3, and #4)</p> <p>Findings include:</p> <p>Employee #2: The employee was hired on 3/10/97. Review of the employee's personnel file failed to reveal documentation that the required annual dementia training was completed.</p> <p>Employee #3: The employee was hired on 9/17/03. Review of the employee's personnel file failed to reveal documentation that the required annual dementia training was completed.</p> <p>Employee #4: The employee was hired on 3/9/04. Review of the employee's personnel file failed to reveal documentation that the required annual dementia training was completed.</p> <p>On 6/22/08 at approximately 2:00 PM, the staff development coordinator was interviewed and confirmed that there was no evidence that Employees #2, #3 and #4 completed the annual dementia training.</p> <p>Severity 2 Scope 2</p>	Z393		

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